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IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF TENNESSEE Civil DIVISION

US DISTRICT COURT MID DIST TENN

	0.011	DIVISION								
(Name) (Prison Id	2769 2001 1. No.)) (List the names of all the plaintiffs filing) this lawsuit. Do not use "et al." Attach) additional sheets if necessary.)								
(Name) (Prison Id	. No.)	Civil Action No (To be assigned by the Clerk's Office. Do not write in this space.)								
٧.) JURY TRIAL REQUESTED 10 YESNO								
MUVEREN (Name)	2010 PD. 2010 # 8882	(List the names of all defendants) against whom you are filing this lawsuit. Do you use "et al." Attach additional sheets if necessary.)								
: De	fendant(s)) } ;								
	•	ION OF CIVIL RIGHTS FILED 42 U.S.C. § 1983								
I. PARTIES T	O THIS LAWSUIT									
A. Plaint	tiff(s) bringing this lawsuit:									
. Р Д	Name of the first plaintiff: \overrightarrow{T} Prison I.D. No. of the first plain Address of the first plaintiff: \overrightarrow{R}	CATY, 940 NEW SOLEM HWY								
Status	Status of Plaintiff: CONVICTED () PRETRIAL DETAINEE ()									
P	Prison I.D. No. of the second pl	aintiff::								
Status	s of Plaintiff: CONVICTED (_) PRETRIAL DETAINEE ()								
Revised 11/2014										

(Include the name of the institution and mailing address with zip code for each plaintiff. If any plaintiff changes his or her address, he or she must notify the Court immediately. If there are more than two plaintiffs, list their names, prison identification numbers, and addresses on a separate sheet of paper.)

	First defendant's address:
17	
	Named in official capacity?
	Name of the second defendant: OFFICIA MOVOY # 8002 Place of employment of the second defendant: MURROS WOYO
	DKI'CO DEPORTMENT

(If there are more than two defendants against whom you are bringing this lawsuit, you must list on a separate sheet of paper the name of each additional defendant, his or her place of employment, address, and the capacity in which you are suing that defendant. If you do not provide the names of such additional defendants, they will not be included in your lawsuit. If you do not provide each defendant's proper name, place of employment, and address, the Clerk will be unable to serve that defendant should process issue.)

II. JURISDICTION

A. Jurisdiction is asserted pursuant to 42 U.S.C. § 1983 (applies to state prisoners). Jurisdiction is also invoked pursuant to 28 U.S.C. § 1343(a)(3).

If you wish to assert jurisdiction under different or additional statutes, you may list them below:

III.	. PREVIOUS LAWSUITS (The following information must be provided by each plants)								
	A.	Have you or any of the other plaintiffs in this lawsuit filed any other lawsuit(s) in the United States District Court for the Middle District of Tennessee, or in any other federal or state court? Yes Your No							
	В.	If you checked the box marked "Yes" above, provide the following information:							
		1.	Parties to the previous lawsuit:						
			Plaintiffs NIA						
			Defendants N/A						
		2.	In what court did you file the previous lawsuit? N/A						
			(If you filed the lawsuit in federal court, provide the name of the District. If you filed the lawsuit in state court, provide the name of the state and the county.)						
:		3.	What was the case number of the previous lawsuit? <u>N/A</u>						
		4.	What was the Judge's name to whom the case was assigned? <u>► / ←</u>						
:									
•		5.	What type of case was it (for example, habeas corpus or civil rights action)? N/A						
	•	6.	When did you file the previous lawsuit? (Provide the year, if you do not know the exact date.)						
:		7.	What was the result of the previous lawsuit? For example, was the case dismissed or appealed, or is it still pending?						
		8.	When was the previous lawsuit decided by the court? (Provide the year, if you do not know the exact date.) <u>NIA</u>						
		9.	Did the circumstances of the prior lawsuit involve the same facts or circumstances that you are alleging in this lawsuit?YesNo						
		sep	you have filed more than one prior lawsuit, list the additional lawsuit(s) on a arate sheet of paper, and provide the same information for the additional isuit(s).)						

V.	EX	HAUSTION
	A.	Are the facts of your lawsuit related to your present confinement?
		<u></u>
	В.	If you checked the box marked "No" in question III.B above, provide the name and address of the prison or jail to which the facts of this lawsuit pertain. RCADC 940 New Sovern Hwy Murfreesword IN 37128
	С.	Do the facts of your lawsuit relate to your confinement in a Tennessee state prison? Yes
		(If you checked the box marked "No," proceed to question IV.G. If you checked the box marked "Yes," proceed to question IV.D.)
	D.	Have you presented these facts to the prison authorities through the state grievance procedure?YesNo
	E.	If you checked the box marked "Yes" in question III.D above:
		1. What steps did you take? N/A
		2. What was the response of prison authorities? NIA
	F.	If you checked the box marked "No" in question IV.D above, explain why not.
	G.	Do the facts of your lawsuit pertain to your confinement in a detention facility operated by city or county law enforcement agencies (for example, city or county jail, workhouse, etc.)? No
	Н.	If "Yes" to the question above, have you presented these facts to the authorities who operate the detention facility? <u>V</u> YesNo
	ı.	If you checked the box marked "Yes" in question III.H above:
		1. What steps did you take? I have alerted modical of

		2.	40	t was t ill ill ill		oonse o		uthoritic			e dete	1 ~	facility?	
	J.	If y	ou che	cked tl	he box	marke	d "No"	in ques	tion IV.	H abov	ve, exp	lain w	hy not.	
v.	CAI	JSE (OF AC	TION										
Briefly	exp	lain v	which	of your	consti	itutiona	ıl rights	were v	iolated	:				
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VI.	STA	TEIV	IENT C	F FACT	ΓS									
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VII. RELIEF REQUESTED: State exactly what you want the Court to order each defendant to do for you. Eventing a dedication that the acts and amissions described herein violated my natt. An injurtion establishing better polacies. Finnally gronting compensatory demandes and my other relief the court deems proper.
I request a jury trial. YesNo
VIII. CERTIFICATION
I (we) certify under the penalty of perjury that the foregoing complaint is true to the best of my (our) information, knowledge and belief.
Signature: Thomas J. Haukun Date: 11-14-24
Prison Id. No. 10 - 0033769 Address (Include the city, state and zip code.): RCADC 940 NPW SOLEM
HW MUNTIPESTOOD, TN 37128
Signature: Date:
Prison Id. No Address (Include the city, state and zip code.):
Address (include the city, state and zip code.).
ALL PLAINTIFFS MUST SIGN AND DATE THE COMPLAINT, and provide the information requested above. If there are more than two plaintiffs, attach a separate sheet of paper with their signatures, dates, prison identification numbers, and addresses.
ALL PLAINTIFFS MUST COMPLETE, SIGN, AND DATE SEPARATE APPLICATIONS TO PROCEED IN
DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS, if not paying the civil filing fee.
SUBMIT THE COMPLAINT AND (1) THE REQUIRED FILING FEE OR (2) COMPLETED APPLICATION
TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES AND COSTS TOGETHER.
Complaints received without the required filing fee or application to proceed without
prepayment of fees will be returned. Filing fees and applications to proceed without

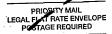
prepayment of fees submitted without a complaint will be returned.





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